

Berkeley Lab Travel



Traveler Receipt Reference Guide

March 2007



ERNEST ORLANDO LAWRENCE
BERKELEY NATIONAL LABORATORY

Examples of Acceptable Receipts

Acceptable Receipts typically include the following:

- Name of the company (airline, hotel, rental car, etc.)
- Name of the traveler
- Transaction dates
- Amount of charges
- Proof/method of payment

This is an **ACCEPTABLE RECEIPT**

- ✓ Conference name
- ✓ Traveler
- ✓ Dates
- ✓ Amounts
- ✓ Payment verification
- ✓ When conference documentation provided



Conference name

ATTENDANCE and PAYMENT VERIFICATION

This is to certify that

Joe Traveler **Traveler's name**

NAME:

INSTITUTION: LAWRENCE BERKELEY NATIONAL LAB

attended the Fall 2006 Meeting held in Boston, MA, November 27th - December 1st

Payment was received for the following: ✓

Dates

Meeting Registration

Payment verification

Total

450.00

450.00

Amounts

If you have any questions or need additional information, please contact

Name, Preregistration Manager

Materials Research Society

forrest@mrs.org

Tel: 724-779-3004 Ext. 420 • Fax: 724-779-8313

This is an **ACCEPTABLE RECEIPT**

- ✓ Vendor
- ✓ Date
- ✓ Amount



BERKELEY ROYAL CAB
&
A.I. AIRPORT EXPRESS CAB

Vendor

For Local & Airports

24 Hrs. Service

(510) CAB RIDE OR 222-7433

(510) 559 TAXI OR 559-8294

Date: 1/10 Cab#: _____ \$ 78

Date

Amount

This is an ACCEPTABLE RECEIPT

- ✓ Vendor
- ✓ Amounts
- ✓ Traveler
- ✓ Method of payment
- ✓ Dates

Note: This receipt was reduced from two pages to one.



Vendor

February 26, 2007

For: JOE TRAVELER XXXXX-000037776
To: LAWRENCE BERKELEY LABS
CO/ SOMEONE IN ACCOUNTING
2120 UNIVERSITY AVE STE 500
BERKELEY CA 94704
510-486-5693

Traveler

Sales Person: OT
Locator: FFQFWB
Customer Number: U1JOL

THIS TICKET MAY BE SUBJECT TO PENALTIES.
CHANGES/CANCELLATION TO THIS ITINERARY MAY BE SUBJECT
TO A PENALTY FEE AND POSSIBLE FARE INCREASE
THE SOUTHWEST RECORD LOCATOR IS CF6GPW

Monday March 19, 2007



Southwest Airlines
Class Of Service: Coach Class M
Depart: OAKLAND, CA
Arrive: SAN DIEGO, CA
Total Flight Time:
Equipment: Boeing 737-300
Meal Service: None
Status: Confirmed
DEP-TERMINAL 2

Flight Number: 939

07:30AM March 19, 2007
08:55AM March 19, 2007
1 Hour 25 Minutes Non-Stop

Dates

Confirmation Number: CF6GPW
ARR-TERMINAL 1

Monday March 19, 2007



Southwest Airlines
Class Of Service: Coach Class H
Depart: SAN DIEGO, CA
Arrive: OAKLAND, CA
Total Flight Time:
Equipment: 73G
Meal Service: None
Status: Confirmed
DEP-TERMINAL 1

Flight Number: 434

04:05PM March 19, 2007
05:35PM March 19, 2007
1 Hour 30 Minutes Non-Stop

Dates

Confirmation Number: CF6GPW
ARR-TERMINAL 2

Wednesday September 19, 2007

Other Service
Sep 19, 2007 - Sep 19, 2007
Departure City: OAKLAND, CA
THANK YOU FOR YOUR BUSINESS

Name	Invoice / Ticket	Base	Tax1	Tax2	Tax3	Total
TRAVELER, JOE	190457/5262374033078	119.07USD	8.93US	6.80ZP	14.00XT	148.80
Total Amount:						148.80

Amount

FOR EMERGENCY ASSISTANCE AFTER HOURS PLEASE CALL
800-582-8395. IDENTIFY WITH EXECUTIVE CODE D25A
BOARDING PASSES ARE NOW REQUIRED TO PASS SECURITY
CHECKPOINTS. BOARDING PASSES ARE AVAILABLE AT THE
TICKET COUNTER, CURBSIDE CHECK-IN OR AN E-TKT KIOSK.
PLEASE CONFIRM SEATING AT AIRPORT CHECK-IN
YOUR SOUTHWEST CONFIRMATION NUMBER IS CF6GPW

Notes:

FORM OF PAYMENT - VI4798*****XXXX

Method of payment

This is an **ACCEPTABLE RECEIPT**

- ✓ Vendor
- ✓ Amounts
- ✓ Traveler
- ✓ Method of payment
- ✓ Dates

Vendor



Hilton

College Station & Conference Center

801 University Drive East • College Station, TX 77840
Phone (979) 693-7500 • Fax (979) 846-7361
Reservations
www.hiltoncs.com or 1 800 HILTONS

Name & Address

Traveler, Joe
Address
BERKELEY, CA 94708
US

Traveler

Room 510/K1
Arrival Date 11/19/06 8:44PM
Departure Date 11/21/06

Dates

Adult/Child 1/0
Room Rate \$73.00

RATE PLAN C-CYCL
HH#
AL: UA #00497273641
BONUS AL: CAR:

Confirmation: 3255108463

11/21/06 PAGE 1

DATE	REFERENCE	DESCRIPTION	AMOUNT
11/19/06	970309	GUEST ROOM	\$73.00
11/19/06	970309	STATE TAX	\$4.38
11/19/06	970309	CITY TAX	\$5.11
11/20/06	970950	GUEST ROOM	\$73.00
11/20/06	970950	STATE TAX	\$4.38
11/20/06	970950	CITY TAX	\$5.11
WILL BE SETTLED TO VS *7666 EFFECTIVE BALANCE OF			\$164.98
			\$0.00

Method of payment

Amounts

Hilton HHonors®
Points & Miles

Thank you for choosing Hilton! Please visit us at hilton.com to view our best available Net Direct rates, plan a special vacation getaway or select a convenient location for your next business trip.

Zip-Out Check-Out®

Good Morning ! We hope you enjoyed your stay. With Zip-Out Check-Out® there is no need to stop at the Front Desk to check out.

- Please review this statement. It is a record of your charges as of late last evening.
 - For any charges after your account was prepared, you may:
 - + pay at the time of purchase.
 - + charge purchases to your account, then stop by the Front Desk for an updated statement.
 - + or request an updated statement be mailed to you within two business days.
- Simply call the Front Desk from your room and tell us when you are ready to depart. Your account will be automatically checked out and you may use this statement as your receipt. Feel free to leave your key(s) in the room.
Please call the Front Desk if you wish to extend your stay or if you have any questions about your account.

DATE OF CHARGE	FOLIO NO./CHECK NO.
	236756 A
AUTHORIZATION	INITIAL
PURCHASES & SERVICES	
TAXES	
TIPS & MISC.	
TOTAL AMOUNT	0.00

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This is an **ACCEPTABLE RECEIPT**

- ✓ Vendor
- ✓ Traveler
- ✓ Dates
- ✓ Amounts
- ✓ Method of payment

NATIONAL
CAR RENTAL

Vendor

RA 511358617 Inv 50009556434
Rental 08-DEC-2006 11:22 AM
TALLAHASSEE ARPT
Return 08-DEC-2006 02:42 PM
JACKSONVILLE INTL ARPT

Dates

Traveler

JOE TRAVELER
Vehicle # 7F135673
Model MALIBU MAXX
Class Driven FCAR Class Charged ICAR
License# 801JBL State/Province TN
M/Kms Driven 189
M/Kms Out 7602
M/Kms In 7791

LAWRENCE LIVERMORE NATIONAL LABORAT
Contract ID 5002435
Charges No Unit Price Amount
T & M 1 Days 42.00 42.00*
UNLIM M/KM 0 M/Kms 0.00*
CDW/LDW 1 Days 0.00
REFUELING 4 Gals 6.25 25.00
 7.08*
FLORIDA SURCHARGE 2.00*
TIRE/BATTERY FEE 0.05*
LICENSE RECOUP FEE 0.39*
SALES TAX @7.500 % 3.86

Total Charges USD 80.38

Amounts

Method of payment

Paid By Visa XXXX -80.38

Amount Due USD 0.00

* Taxable Items
Subject to Audit
Your Emerald Club Number is XXXXXXXX
Emerald Club rental credits will be
posted within 24 hours
We hope you enjoyed driving your
upgraded Emerald Club vehicle.
Customer service Number 1-800-468-3334

This is an **ACCEPTABLE RECEIPT**

- ✓ Vendor
- ✓ Traveler
- ✓ Dates
- ✓ Amounts
- ✓ Proof of payment

("You are welcome to use this bill as your final receipt.")



GAYLORD OPRYLAND™

RESORT & CONVENTION CENTER

Nashville

Traveler

Joe Traveler

1

Vendor

Dates

PAGE 1
ARRIVAL 10/25/06
DEPARTURE 10/28/06
NO. IN PARTY 1

GROUP I.D. N-DNPUP

ROOM CA C3130

RESV NUMBER 389815222530

FOLIO NUMBER 390150573338

STATEMENT DATE 10/28/06

DATE	REFERENCE	DESCRIPTION	CHARGES	CREDITS	BALANCE
10/25/06	390149002414	RESORT FEE	10.00		
		RESORT FEE TAX	.93		10.93
10/25/06	390149002415	SELF PARKING NO DRIVE			10.93
10/25/06	390149006269	ROOM CHARGE CAC3130 TAX	140.00 19.95		170.88
10/26/06	390159003806	RESORT FEE RESORT FEE TAX 130	10.00 .93	30.88	181.81
10/26/06	390159003807	SELF PARKING NO DRIVE			181.81
10/26/06	390159006008	ROOM CHARGE CAC3130 TAX	140.00 19.95		341.76
10/26/06	390150603907	FINDLEY'S IRISH PUB 389815222530	24.41		366.17
10/27/06	390169004061	RESORT FEE RESORT FEE TAX 130	10.00 .93		377.10
10/27/06	390169004062	SELF PARKING NO DRIVE			377.10
10/27/06	390169005996	ROOM CHARGE CAC3130 TAX	140.00 19.95		

Amounts

Amounts

Thank you for staying with us

You are welcome to use this bill as your final receipt. Please ~~advise us of your~~ departure by calling 102, using in room check-out or express check-out kiosks.

BALANCE DUE 537.05

This is an **ACCEPTABLE RECEIPT**

- ✓ Vendor
- ✓ Traveler
- ✓ Dates
- ✓ Amounts
- ✓ Method of payment

Vendor



Dates

Joe Traveler

Traveler's name

1234 Happy Place Dr.
Somewhere, CA 56789

Arrival: 10/24/06
Departure: 10/27/06
Room: 4152
Page: 1

Folio No. 205422

Date	Description	Debit	Credit	Cashier
10/24/06	Long Distance Calls 510-526-8215	14.78		FOSERVER
10/24/06	Room	95.00		KIRBYL
10/24/06	Room Tax *Room	9.90		KIRBYL
10/25/06	Terrace Cafe Food #4152 : CHECK #376	7.53		FOSERVER
10/25/06	Long Distance Calls 510-526-8215	4.25		FOSERVER
10/25/06	Room	95.00		KENESHIAH
10/25/06	Room Tax *Room	9.90		KENESHIAH
10/26/06	Long Distance Calls 510-684-8514	6.50		FOSERVER
10/26/06	Room	95.00		RUTHO
10/26/06	Room Tax *Room	9.90		RUTHO
10/27/06	Visa Card XXXXXXXXXXXX9752 11/06		347.76	BECKYD

Amounts

Method of Payment

Balance: \$0

Signature: _____

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges.

Thank-You for staying with us !!!!

Please visit our website: www.pheasantrun.com for our latest exciting offers.

- ✓ Vendor
- ✓ Traveler
- ✓ Dates
- ✓ Amounts
- ✓ Method of payment

UNN TTE D

TRAVELER / JOE

""NOT VALID FOR ""
""TRANSPORTATION""

NONREF-CHG100PLUSFAREDIF./CXL BY FLT DATE OR NOVALUE

VIXXXXXXXXXXXX3920

7VE14N3NX USD360.93END ZPSF0JFK XT 6.60ZP 5.00AY 9.00XSF04.5JFK4.5

USD360.93
US27.07
XT20.60
USD408.60

Amounts

ETKT PASSENGER RECEIPT
 "**** DUPLICATE 2149756987
 "**** C 43713-5
 CONXC US10NOV06
 GR4V8/UA MULTI 0
THIS IS YOUR RECEIPT
 000136

XGR4V8/UA MULTI

THIS IS YOUR RECEIPT

000136

0 016 2149756987 1

UNITED

2149756987

TRAVELER / JOE

SFOJFKUA

10 S11DEC

17 V14DEC

[illegible]

0 016 21497569871

STAR ALLIANCE

TAR ALLIANCE

Examples of Unacceptable as Receipts

Not qualified as receipts: The following documents do not meet conditions of an acceptable receipt (usually missing amounts and/or proof of payment):

- Airline boarding passes
- Itinerary
- Registration forms without payment confirmations
- Hotel check-in forms/confirmations
- Rental car estimates/agreements?

This is NOT A RECEIPT

- Says "Boarding Pass"
- There are no dollar amounts indicated
- Shows no method of payment

PASSENGER TICKET AND BAGGAGE CHECK
SUBJECT TO CONDITIONS OF CONTRACT.

ISSUED BY **American Airlines** oneworld

ISS. AGENT ID. **12DEC06** PLACE OF ISSUE **US**

NAME OF PASSENGER (NOT TRANSFERABLE) **TRAVELER / JOE**

FARE BASIS **DALLAS FT WORTH** FCI **TRAVELER / JOE**

FROM **DALLAS FT WORTH** TO **WASHINGTON REAGAN**

AA 1296 Q 12DEC200P

PNR CODE **HZKNKI / RR**

BOARDING PASS

GROUP 4
SEAT 21F

21F

GROUP

FARE **00110268732740**

ELECTRONIC
2 001 7800593022 1

5BV /DFW

American Airlines oneworld BOARDING PASS

PASSENGER NAME **TRAVELER / JOE**

FREQUENT FLYER # **7KV1358**

RECORD LOCATOR **HZKNKI**

FROM: **SAN FRANCISCO**

TO: **DALLAS/FORT WORTH**

FLIGHT **AA 532** CLASS **6** DATE **12DEC** DEPARTS **630A**

GATE **63** BOARDING TIME **600A** SEAT **19A**

GROUP 4

ELECTRONIC

0017800593022

SELF-SERVICE CPN 2341138

American Airlines

BOARDING PASS
TRAVELER / JOE

FROM: **SAN FRANCISCO**

TO: **DALLAS FORT WORTH**

FLIGHT **AA 532** SEAT **19A**

GROUP 4

DATE **12DEC** CLASS **6** DEPARTS **630A**

This is **NOT A RECEIPT**

- This is an itinerary
- Shows no method of payment

<http://app2.outtask.com/common/printpage.asp?contentdiv>



Carlson Wagonlit Travel (Lawrence Berkeley National Labs)
888-243-1125 Press 5
24 hours, 7 days a week



Trip from Oakland to San Diego

Travel Authorization - 9 Digits Only - Lead with zeros: 000037776

Itinerary for: **JOE TRAVELER**

Created on: 02/26/2007 at 5:08 PM

Trip Record Locator: FFQFWB

[View Fare Rules](#)

FOR EMERGENCY ASSISTANCE AFTER HOURS PLEASE CALL
800-582-8395. IDENTIFY WITH EXECUTIVE CODE D25A
BOARDING PASSES ARE NOW REQUIRED TO PASS SECURITY
CHECKPOINTS. BOARDING PASSES ARE AVAILABLE AT THE
TICKET COUNTER, CURBSIDE CHECK-IN OR AN E-TKT KIOSK.
Selected Ticket Delivery: E-Ticket if possible



Metro Oakland Intl Arpt (OAK) to Lindbergh Intl Arpt (SAN)

Flight:	Southwest Airlines	Flight # 0939 Economy (M)	Boeing 737-300
Departs:	Metro Oakland Intl Arpt (OAK), Terminal: 2		Mon 03/19/2007 at 7:30 AM
Arrives:	Lindbergh Intl Arpt (SAN) Terminal: 1		Mon 03/19/2007 at 8:55 AM
Status:	Confirmed	Ticketing:	E-Ticket
Stops:	Nonstop	Meal:	No Meal Served
Duration:	1 hour, 25 minutes	Flt Miles:	448

Airline Record Locator: CF6GPW



Lindbergh Intl Arpt (SAN) to Metro Oakland Intl Arpt (OAK)

Flight:	Southwest Airlines	Flight # 0434 Economy (H)	Boeing 737-700
Departs:	Lindbergh Intl Arpt (SAN), Terminal: 1		Mon 03/19/2007 at 4:05 PM
Arrives:	Metro Oakland Intl Arpt (OAK) Terminal: 2		Mon 03/19/2007 at 5:35 PM
Status:	Confirmed	Ticketing:	E-Ticket
Stops:	Nonstop	Meal:	No Meal Served
Duration:	1 hour, 30 minutes	Flt Miles:	448

Airline Record Locator: CF6GPW

Totals and restrictions

Airfare quoted amount:	\$119.07 USD
Landing fees and taxes:	\$29.73 USD
Airfare quoted total:	\$148.80 USD View Fare Rules

Restrictions: NON REFUNDABLE/STANDBY REQ UPGRADE TO YL

TICKET NOT YET ISSUED. AIRFARE QUOTED IN ITINERARY IS NOT GUARANTEED UNTIL TICKETS ARE ISSUED.

Itinerary generated on Mon 02/26/2007 6:09 PM

This is NOT A RECEIPT

- This is an estimate only
- Shows no proof of payment



RA # 511358617		RES # 530168711	
Joe Traveler Hometown, CA 94720		CONTRACT ID 5002435 EXT REF #	
RENTAL LOCATION TALLAHASSEE ARPT (888)826 6890 3300 CAPITAL CIRCLE SW TALLAHASSEE, FL 32310		RENTAL DATE 08-DEC-2006 RENTAL TIME 11:22 AM	
		EC # 756727252 FT #	
		RETURN LOCATION JACKSONVILLE INTL ARPT (904)741 3110 JACKSONVILLE INTL ARPT JACKSONVILLE, FL 32229	
		RETURN DATE 08-DEC-2006 RETURN TIME 05:01 PM	
RATE RULES AND QUALIFICATIONS INITIAL X _____ CONTRACT FLAT RATE Monthly Charge up to 31 Days		VEHICLE INFORMATION RESERVED Intermediate 2/4 Door Car Auto A/C DRIVEN Full Size 2/4 Door Car Auto A/C CHARGED Intermediate 2/4 Door Car Auto A/C MAKE CHEVROLET MODEL MALIBU MAXX COLOR BLUE DK ODOMETER 7602 PLATE 801JBL REG AREA TN VEHICLE # 7F135673 BAY R1 STALL 15	
CHARGES	UNIT	PRICE/UNIT	CURRENT CHARGE
RENTER'S RESPONSIBILITY			
* TIME & DISTANCE	MONTH	1008.00 X	0.00
* TIME & DISTANCE	WEEK	252.00 X	0.00
* TIME & DISTANCE	Day	42.00 X 1	42.00
* TIME & DISTANCE	Hour	21.00 X	0.00
* UNLIMITED MILES/KM-TIME & DISTANCE	M/KM	0.00 X	0.00
REFUELING SERVICE CHARGE	Gallon	6.25 X	0.00
* CONCESSION RECOUP FEE 10.50 PCT @ 10.50%			4.46
* FLORIDA SURCHARGE 2.00/DAY	Day		2.00
* TIRE/BATTERY FEE .05/DAY	Day		0.05
* LICENSE RECOUPMENT FEE .39/DAY	Day		0.39
SALES TAX 7.50%			3.67
ESTIMATED CHARGES			52.57 INITIAL X _____
(All Charges Are Estimate Only - Subject to change if vehicle not returned to the location on date and time specified, or if fuel tank is not full at return and fuel service option was not purchased).			
PAYMENTS VISA 6009 Auth #			
LOSS DAMAGE WAIVER (LDW) IS INCLUDED IN THIS RENTAL.			
I DECLINE PERSONAL ACCIDENT INSURANCE (PAI) WITH PERSONAL EFFECTS COVERAGE (PEC). X _____			
I DECLINE OPTIONAL THIRD PARTY BODILY INJURY AND PROPERTY DAMAGE INSURANCE (SLI). X _____			
MY COMPANY'S AGREEMENT PROVIDES LOSS DAMAGE WAIVER (LDW) FOR BUSINESS RENTALS; OTHERWISE I AM RESPONSIBLE FOR ALL LOSS OR DAMAGE TO THE VEHICLE. X _____			
THE VALID AND COLLECTIBLE LIABILITY INSURANCE AND PERSONAL INJURY PROTECTION INSURANCE OF ANY AUTHORIZED RENTAL OR LEASING DRIVER IS PRIMARY FOR THE LIMITS OF LIABILITY AND PERSONAL INJURY PROTECTION COVERAGE REQUIRED BY SS. 324.021(7) AND 627.736, FLORIDA STATUTES. X _____			
PLEASE READ IMPORTANT INFORMATION REGARDING AUTHORIZED DRIVERS WITHIN THE AGREEMENT (SEE RENTAL AGREEMENT JACKET).			
YOU AGREE TO ALL PROVISIONS CONTAINED WITHIN THIS AGREEMENT, INCLUDING THOSE CONTAINED WITHIN NATIONAL'S RENTAL AGREEMENT JACKET AND ALL APPLICABLE OPTIONAL PRODUCT BROCHURES, AND YOU ACKNOWLEDGE RECEIPT OF EACH OF THEM. YOU UNDERSTAND THAT IF YOU DO NOT COMPLY WITH THE TERMS OF ANY APPLICABLE CORPORATE, GOVERNMENT, OR TOUR ACCOUNT AGREEMENT AND THE TERMS OF THIS RENTAL AGREEMENT, ALL LIABILITY AND UNINSURED/UNDERINSURED MOTORIST BENEFITS, IF ANY, ARE WITHDRAWN AND WILL NOT BE PROVIDED.			
RENTER : _____			



This is **NOT A RECEIPT**

- Shows no method of payment

Page No. 1



1914 Connecticut Avenue N.W.
Washington, DC 20009
Tel: 202-797-2000
Fax: 202-462-0944

Guest Name: Joe Traveler
American Astronomical Society
., AL

Room #: 508
Folio #: R17CD9 - 1
Group #: 9193
Guests: 1
Clerk:

CL #:

CC #: *****

Arrive: 11/28/06 Time: 01:38 PM Depart: 11/30/06 Time: 04:10:02 Status: FOL

Date	Description	Reference	Comment	Charges	Credits
11/28/2006	ROOM	508		\$159.00	
11/28/2006	TAX	508t	TAX	\$23.06	
11/29/2006	ROOM	508		\$159.00	
11/29/2006	TAX	508t	TAX	\$23.06	

Folio Balance: \$364.12

Signature: _____

This is **NOT A RECEIPT**

- Shows no proof of payment

Joe Traveler NAME (PLEASE PRINT)		Travelodge 1112 North Hollywood Way Burbank, CA 91505 818-845-2408 • Fax: 818-845-2840		Room 20	
LBNL COMPANY		PHONE NO.		Name	
1 Cyclotron Rd STREET		CITY		STATE	
Berkeley CA		94702		ZIP CODE	
NOTICE: This franchised hotel is independently owned and operated. You agree personally to pay all charges incurred during your stay, in advance if asked, even if your credit card or billed party doesn't pay hotel; abide by posted procedures for safekeeping valuables and house rules; and vacate by the departure date and check-out time. Hotel may refuse service and is not responsible for property damage or loss. Your party assumes all risks of personal injury unless caused by hotel's sole negligence.		Arrival Date 11/27		Departure Date 12/01	
Car Lic. Plate No.		State		Car No. in Party	
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Check <input type="checkbox"/> MC <input type="checkbox"/> VISA <input type="checkbox"/> AE <input type="checkbox"/> Other		Rate 79.00		Tax 7.90	
X Joe Traveler GUEST SIGNATURE		TOTAL 86.90		Phone	
		Misc. 4 nights		TOTAL 347.60	
		Amt. Pd.		Clerk	

This is a CONFERENCE REGISTRATION

- ✓ Conference Name
- ✓ Location
- ✓ Dates
- ✓ Amounts & what is included for that cost



INTERNATIONAL OIL & GAS CONFERENCE AND EXHIBITION IN CHINA 5-7 DECEMBER 2006 • BEIJING, CHINA ON-SITE REGISTRATION FORM



Conference
name,
Location,
and Dates

NOTE: All portions of this form must be completed. Print names as they should appear on meeting badge. Registration will not be processed without payment. This form can be used as a company invoice.

SPE Member: ☐ Yes Membership No. _____ ☐ No

Name: _____
(First/Forename) (Middle) (Last/Family Name)

Position: _____

Company: _____

Address: _____

Town/City: _____ Zip/Postal Code: _____ Country: _____

Tel: _____ Fax: _____

Email: _____

FULL THREE DAY REGISTRATION (Includes technical sessions, exhibition, luncheons, coffee/tea breaks, welcome reception/dinner/Beijing night and CD ROM Proceedings)		ONE DAY REGISTRATION (Includes technical sessions, exhibition, luncheon and coffee/tea breaks for that day only) Check Day you will attend <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday	
MEMBER	<input type="checkbox"/> USD700/RMB5,600	MEMBER	<input type="checkbox"/> USD350/RMB2,800
NONMEMBER*	<input type="checkbox"/> USD800/RMB6,400	NONMEMBER	<input type="checkbox"/> USD400/RMB3,200
SPEAKER/AUTHOR/ SESSION CHAIRPERSON/ COMMITTEE	<input type="checkbox"/> USD550/RMB4,400	VISITOR (Includes exhibition and coffee/ tea breaks for that day only)	<input type="checkbox"/> USD40/RMB320
STUDENT (Includes technical sessions, exhibition and coffee/tea breaks only)	<input type="checkbox"/> Complimentary (with valid student ID)	ADDITIONAL CD-ROM PROCEEDINGS	
		MEMBER	<input type="checkbox"/> USD150/RMB1,200
		NONMEMBER	<input type="checkbox"/> USD200/RMB1,600
*ATTENTION NONMEMBER Did you know that you can join the Society of Petroleum Engineers during IOGCEC and receive your first year's membership FREE? Stop by the SPE Membership Booth to take advantage of this special offer.		ADDITIONAL LUNCHEON TICKET Check day you will attend: <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday # _____ X USD35/RMB280	

Amounts and
what is
included in
the cost

GRAND TOTAL: USD/RMB _____

PAYMENT OPTIONS

- ☐ Cash-US Dollars
- ☐ Cash-Renminbi
- ☐ U.S. Dollars Cheque or Demand Draft Payable to
Society of Petroleum Engineers.

PAYMENT BY CREDIT CARD

- Credit Card Payment will be in U.S. Dollars only
- ☐ American Express ☐ Master Card
 - ☐ Visa ☐ Diners Club

Card Number

Exp. Date

Signature

Name as it appears on Card _____

Billing address of Card _____